BIRCH, STEWART, KOLASCH & BIRCH, LLP

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COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

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Insert Title:	TMMUNOGENI	.C RECOMBI	NANT ANTIBODY				
Fill in Appropriate Information -	the specification of which is attached hereto. If not attached hereto, the application is identified by the attorney docket number as set forth above and/or the following: The specification was filed onas						
For Use Without							
Specification	and amended on					(if applicable	e) and/or
Attached:	the specification	was filed on	* PCT/EP2004	004059			_ as PCT
	amended on	[February 5, 20	05		; (if an	and was
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I do not know and do not believe the same was ever known or used in the United States of America before my or our invention						
	Regulations, §1.56. I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows. I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:						
Insert Priority	Prior Foreign Appli	cation(s)				Priority (Claimed
Information:	A 599/2003	Aust	tria	04/17	7/2003		
(if appropriate)	(Number)	(Country)		(Month/Da	ay/Year Filed)	Yes	No
	(Number)	(Country)		(Month/Da	ay/Year Filed)	☐ Yes	□ No
	(Number)	(Country)		(Month/Da	ay/Year Filed)	□ Yes	□ No
	(Number)	(Country)	· · · · · · · · · · · · · · · · · · ·	(Month/Da	ay/Year Filed)	□ Yes	□ No
	I hereby claim the benefit under Title 35, United States Code, \$119(e) of any United States provisional applications(s) listed below.						sted below.
Insert Provisional Application(s): (if any)	(Application Number)			(Filing 1	Date)		
	(Application Number) (Filing Date)						
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:						
Insert Requested Information: (if appropriate)	Country		Application Number		Date of Filing (Mont	h/Day/Year)	
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including for continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.						
Insert Prior U.S. Application(s): (if any)	(Application Number)		(Filing Date)		(Status - patented, pe	ending, abandon	ed)
Page 1 of (Rev. 07/2003)	(Application Number)		(Filing Date)		(Status - patented, pe	ending, abandon	ed)

Attorney Docket No.

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

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PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

full Name of First	CHUNA IAA GA (FAA GI) (AIAA G						
Full Name of First or Sole Inventor: insert Name of Inventor Inventor insert Date This Document is Signed	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Hans LOIBNER		11.	1 27.08:12005			
insert Residence insert Citizenship →	Residence (City, State & Country)		CITIZENS	P / //			
	Vienna, Austria		AT ///	2/0/h			
nsert Post Office Address →	MAILING ADDRESS (Complete Street Address	including City, State & Country)		/			
	Heimgasse 23, A-1238 Vienna, Austria						
full Name of Second Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	and the second second field and the second second second	DATE*			
see above	Gottfried HIMMLER						
	Residence (City, State & Country)	.1	CITIZENSHII	P			
	Vienna, Austria		AT	·			
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Full Name of Third Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
see above	Günter WAXENECKER						
	Residence (City, State & Country)		CITIZENSHII	P P			
	Mank, Austria		AT	1			
,	MAILING ADDRESS (Complete Street Address including City, State & Country)						
	Loitzbach 8, A-3240 Mank, A	3,					
Full Name of Fourth	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
Inventor, if any: see above	Manfred SCHUSTER	IIIVILIVIONO DIGINITONE		DAIL			
	Residence (City, State & Country)		CITIZENSHII	<u> </u> 			
	Schrick, Austria		AT				
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	Josef Weilandstrasse 84, A-2191 Schrick, Austria						
Full Name of Fifth	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		ן די אינוין. קינוין			
Inventor, if any: see above	Thomas PUTZ	INVENTORSSIGNATURE		DATE*			
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	Innsbruck, Austria	AT					
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Full Name of Sixth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Residence (City, State & Country)	<u></u>	CITIZENSHII	P			
	MAILING ADDRESS (Complete Street Address	including City, State & Country)					
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full Name of First or Sole Inventor:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
oull Name of First or Sole Inventor; nsert Name of Inventor → nsert Date This Document is Signed	Hans LOIBNER						
nsert Residence	Residence (City, State & Country)		CITIZENSH	IP -			
nsert Citizenship →	Vienna, Austria	AT					
nsert Post Office Address →	MAILING ADDRESS (Complete Street Addre	ess including City, State & Country)					
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full Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTORSIGNATURE		DATE*			
	Gottfried HIMMLER	I Vole		70.9.2005			
	Residence (City, State & Country)		CITIZENSHI				
	Vienna, Austria	المادار وراميد	A	r ·			
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ull Name of Third Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
see above	Günter WAXENECKER	Cut lilar		10/09/10			
	Residence (City, State & Country)	June War in	CITIZENSHI	P			
	Mank, Austria	/	ra l				
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ull Name of Fourth Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTORSSIGNATURE	»	DATE*			
see above	Manfred SCHUSTER		ACCOUNT OF THE PROPERTY OF THE	10/00/05			
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ull Name of Fifth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*			
	Thomas PUTZ						
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	Residence (City, State & Country)		CITIZENSHII	D			
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Full Name of First	GIVEN NAME/FAMILY NAME	TAR TENTE CHO LA TENTE				
Full Name of First or Sole Inventor; Insen Name of Inventor Insert Date This Document is Signed	Hans LOIBNER	INVENTOR'S SIGNATURE		DATE*		
	Residence (City, State & Country)		Contractor (CL 111			
Insert Residence Insert Citizenship →	Vienna, Austria	•	CITIZENSHII	,		
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Full Name of Second	GIVEN NAME/FAMILY NAME					
Inventor, if any: see above	Gottfried HIMMLER	INVENTOR'S SIGNATURE		DATE*		
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Full Name of Third	GIVEN NAME/FAMILY NAME					
Inventor, if any: see above	!	INVENTOR'S SIGNATURE		DATE*		
	Günter WAXENECKER Residence (City, State & Country)		CIGNATIVACIAN			
	Mank, Austria		CITIZENSHIP	'		
		noluding City State & Country)	AT			
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full Name of Fourth	Loitzbach 8, A-3240 Mank, Au GIVEN NAME/FAMILY NAME					
Inventor, if any: see above	Manfred SCHUSTER	INVENTOR'S SIGNATURE		DATE*		
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	Schrick, Austria	Ī				
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ull Name of Fifth	GIVEN NAME/FAMILY NAME					
Inventor, if any: see above	Thomas PUTZ	INVENTOR'S SIGNATURE		DATE*		
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	Mentlgasse 7/42, A-6020 Innsk					
ull Name of Sixth						
Inventor, if any: see above	GIVEN NAME/FAMILI NAME	INVENTOR'S SIGNATURE		DATE*		
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